

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the First
Amended Petition to Revoke
Probation Against:**

Vahe Michael Azarian, M.D.

**Physician's and Surgeon's
Certificate No. A 125140**

Respondent

Case No. 800-2018-043782

DECISION

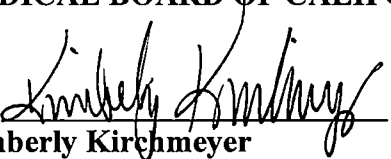
The Stipulated Surrender of License and Order in the above-entitled matter is attached hereto. On the Medical Board of California's own motion, said Decision is hereby amended to correct a clerical error so that each reference to "800-2017-043782" is stricken and replaced with "800-2018-043782."

The attached Stipulated Surrender of License and Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on June 17, 2019.

IT IS SO ORDERED June 10, 2019.

MEDICAL BOARD OF CALIFORNIA

By: 
Kimberly Kirchmeyer
Executive Director

1 XAVIER BECERRA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
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8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

11 In the Matter of the First Amended Petition to
12 Revoke Probation Against:

13 **VAHE MICHAEL AZARIAN, M.D.**

14 **Physician's and Surgeon's**
15 **Certificate No. A 125140,**

16 **Respondent.**

Case No. 800-2017-043782

OAH No. 2018090715

17 **STIPULATED SURRENDER OF**
18 **LICENSE AND ORDER**

17 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
18 entitled proceedings that the following matters are true:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
21 of California (Board). She brought this action solely in her official capacity and is represented in
22 this matter by Xavier Becerra, Attorney General of the State of California, by Edward Kim,
23 Deputy Attorney General.

24 2. Vahe Michael Azarian, M.D. (Respondent) is representing himself in this proceeding
25 and has chosen not to exercise his right to be represented by counsel.

26 3. On April 4, 2013, the Board issued Physician's and Surgeon's Certificate No. A
27 125140 to Respondent. The Physician's and Surgeon's Certificate was in full force and effect at
28 all times relevant to the charges brought in First Amended Petition to Revoke Probation No. 800-

1 2017-043782 and expired on February 28, 2019.

2 **JURISDICTION**

3 4. The First Amended Petition to Revoke Probation in Case No. 800-2017-043782 was
4 filed before the Board, and is currently pending against Respondent. The First Amended Petition
5 to Revoke Probation and all other statutorily required documents were properly served on
6 Respondent on April 10, 2019. Respondent filed his Notice of Defense contesting the allegations
7 in the First Amended Petition to Revoke Probation. A copy of First Amended Petition to Revoke
8 Probation No. 800-2017-043782 is attached as Exhibit A and is incorporated by reference.

9 **ADVISEMENT AND WAIVERS**

10 5. Respondent has carefully read, and understands the charges and allegations in First
11 Amended Petition to Revoke Probation No. 800-2017-043782. Respondent also has carefully
12 read, and understands the effects of this Stipulated Surrender of License and Order.

13 6. Respondent is fully aware of his legal rights in this matter, including the right to a
14 hearing on the charges and allegations in the First Amended Petition to Revoke Probation; the
15 right to be represented by counsel, at his own expense; the right to confront and cross-examine
16 the witnesses against him; the right to present evidence and to testify on his own behalf; the right
17 to the issuance of subpoenas to compel the attendance of witnesses and the production of
18 documents; the right to reconsideration and court review of an adverse decision; and all other
19 rights accorded by the California Administrative Procedure Act and other applicable laws.

20 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
21 every right set forth above.

22 **CULPABILITY**

23 8. Respondent understands that the charges and allegations in the First Amended
24 Petition to Revoke Probation No. 800-2017-043782, if proven at a hearing, constitute cause for
25 imposing discipline upon his Physician's and Surgeon's Certificate.

26 9. For the purpose of resolving the First Amended Petition to Revoke Probation without
27 the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing,
28 Complainant could establish a prima facie case for the charges in the First Amended Petition to

1 Revoke Probation and that those charges constitute cause for discipline. Respondent hereby
2 gives up his right to contest that cause for discipline exists based on those charges.

3 10. Respondent understands that by signing this stipulation he enables the Board to issue
4 an order accepting the surrender of his Physician's and Surgeon's Certificate without further
5 process.

6 CONTINGENCY

7 11. This stipulation shall be subject to approval by the Board. Respondent understands
8 and agrees that counsel for Complainant and the staff of the Board may communicate directly
9 with the Board regarding this stipulation and surrender, without notice to or participation by
10 Respondent. By signing the stipulation, Respondent understands and agrees that he may not
11 withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers
12 and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the
13 Stipulated Surrender and Disciplinary Order shall be of no force or effect, except for this
14 paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not
15 be disqualified from further action by having considered this matter.

16 12. The parties understand and agree that Portable Document Format (PDF) and facsimile
17 copies of this Stipulated Surrender of License and Order, including PDF and facsimile signatures
18 thereto, shall have the same force and effect as the originals.

19 13. In consideration of the foregoing admissions and stipulations, the parties agree that
20 the Board may, without further notice or formal proceeding, issue and enter the following Order:

21 ORDER

22 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 125140,
23 issued to Respondent Vahe Michael Azarian, M.D., is surrendered and accepted by the Board.

24 1. The surrender of Respondent's Physician's and Surgeon's Certificate and the
25 acceptance of the surrendered license by the Board shall constitute the imposition of discipline
26 against Respondent. This stipulation constitutes a record of the discipline and shall become a part
27 of Respondent's license history with the Board.

28 2. Respondent shall lose all rights and privileges as a Physician and Surgeon in

1 California as of the effective date of the Board's Decision and Order.

2 3. Respondent shall cause to be delivered to the Board his pocket license and, if one was
3 issued, his wall certificate on or before the effective date of the Decision and Order.

4 4. If Respondent ever files an application for licensure or a petition for reinstatement in
5 the State of California, the Board shall treat it as a petition for reinstatement. Respondent must
6 comply with all the laws, regulations and procedures for reinstatement of a revoked or
7 surrendered license in effect at the time the petition is filed, and all of the charges and allegations
8 contained in First Amended Petition to Revoke Probation No. 800-2017-043782 shall be deemed
9 to be true, correct and admitted by Respondent when the Board determines whether to grant or
10 deny the petition.

11 5. If Respondent should ever apply or reapply for a new license or certification, or
12 petition for reinstatement of a license, by any other health care licensing agency in the State of
13 California, all of the charges and allegations contained in First Amended Petition to Revoke
14 Probation, No. 800-2017-043782 shall be deemed to be true, correct, and admitted by Respondent
15 for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict
16 licensure.

17 6. If Respondent ever files with the Board an application for licensure or a petition for
18 reinstatement in the State of California, Business and Professions Code Section 2307, subdivision
19 (b)(I), shall apply, allowing Respondent to petition for reinstatement two years after the effective
20 date of the Board's Decision and Order.

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DATED:

ENDORSEMENT

Dated: May 20, 2019

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
E. A. JONES III
Supervising Deputy Attorney General

EDWARD KIM
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

First Amended Petition to Revoke Probation No. 800-2017-043782

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7 Attorneys for Complainant

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO April 10 2019
BY SARAH J. JONES ANALYST

8 BEFORE THE
MEDICAL BOARD OF CALIFORNIA
9 DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

10
11 In the Matter of the First Amended Petition to
Revoke Probation Against:

12 VAHE MICHAEL AZARIAN, M.D.
13 1231 North Cedar Street
14 Glendale, CA 91207

15 Physician's and Surgeon's
Certificate No. A 125140,

16 Respondent.

OAH No.: 2018090715

Case No. 800-2018-043782

FIRST AMENDED PETITION TO
REVOKE PROBATION

17
18 Complainant alleges:

19 PARTIES

20 1. Kimberly Kirchmeyer (Complainant) brings this First Amended Petition to Revoke
21 Probation (Petition) solely in her official capacity as the Executive Director of the Medical Board
22 of California, Department of Consumer Affairs.

23 2. On or about April 4, 2013, the Medical Board of California issued Physician's and
24 Surgeon's Certificate Number A 125140 to Vahe Michael Azarian, M.D. (Respondent). The
25 Physician's and Surgeon's Certificate was in effect at all times relevant to the charges brought
26 herein and will expire on February 28, 2019, unless renewed.

27 DISCIPLINARY HISTORY

28 3. In a disciplinary action entitled "In the Matter of the Accusation Against Vahe

1 Michael Azarian, M.D.," Case No. 800-2015-017850, the Medical Board of California, issued a
2 decision (Decision), effective June 16, 2017, in which Respondent's Physician's and Surgeon's
3 Certificate was revoked. However, the revocation was stayed and Respondent's Physician's and
4 Surgeon's Certificate was placed on probation for a period of seven (7) years with certain terms
5 and conditions. A copy of that decision is attached as Exhibit A and is incorporated by reference.

6 JURISDICTION

7 4. This Petition to Revoke Probation is brought before the Medical Board of California
8 (Board), Department of Consumer Affairs, under the authority of the following laws. All section
9 references are to the Business and Professions Code (Code) unless otherwise indicated.

10 5. Section 2227 of the Code provides that a licensee who is found guilty under the
11 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
12 one year, placed on probation and required to pay the costs of probation monitoring, or such other
13 action taken in relation to discipline as the Board deems proper.

14 6. Section 2234 of the Code states:

15 "The board shall take action against any licensee who is charged with unprofessional
16 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not
17 limited to, the following:

18 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
19 violation of, or conspiring to violate any provision of this chapter.

20 "(b) Gross negligence.

21 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
22 omissions. An initial negligent act or omission followed by a separate and distinct departure from
23 the applicable standard of care shall constitute repeated negligent acts.

24 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for
25 that negligent diagnosis of the patient shall constitute a single negligent act.

26 "(2) When the standard of care requires a change in the diagnosis, act, or omission that
27 constitutes the negligent act described in paragraph (1), including, but not limited to, a
28 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the

1 applicable standard of care, each departure constitutes a separate and distinct breach of the
2 standard of care.

3 “(d) Incompetence.

4 “(e) The commission of any act involving dishonesty or corruption which is substantially.
5 related to the qualifications, functions, or duties of a physician and surgeon.

6 “(f) Any action or conduct which would have warranted the denial of a certificate.

7 “(g) The practice of medicine from this state into another state or country without meeting
8 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not
9 apply to this subdivision. This subdivision shall become operative upon the implementation of the
10 proposed registration program described in Section 2052.5.

11 “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and
12 participate in an interview by the board. This subdivision shall only apply to a certificate holder
13 who is the subject of an investigation by the board.”

14 FACTUAL BACKGROUND

15 7. Respondent began using marijuana while he was in medical school. He started using
16 “poppers,” a slang term given to the chemical class, alkyl nitrites, which are inhaled for
17 recreational purposes. Over the next several years he began to abuse Ativan, Xanax, cocaine,
18 methamphetamine, GHB (also known as the “date rape” drug), MDMA (a stimulant) and
19 ketamine (an anesthetic). He used these drugs in combination, producing a “speed ball” to “even
20 out” and control the agitation produced by stimulants.

21 8. Respondent received his M.D. degree in or around 2011. That same year he began an
22 internal medicine residency program (Program). In or around 2013, the Program removed
23 Respondent from his clinical duties, placed him on medical leave, and referred him to the Medical
24 Staff Health Program due to a positive urine drug test for amphetamines and concerns about his
25 performance. He entered a residential drug rehabilitation program and was able to return to his
26 residency. However, the Program ultimately terminated him in or around 2015 due to his failure
27 to comply with the terms of his monitoring agreement. His termination notice stated that he was
28 being terminated from the program because “. . . your performance and conduct do not meet the

1 standards of professionalism and demonstrated ability to provide safe patient care.” The Program
2 notified the Board of Respondent’s termination from the program under the provisions of Code
3 section 805.

4 9. After termination of his residency with the Program, Respondent worked for a chain
5 of urgent care facilities which had six walk-in clinics. Respondent worked at each clinic. While
6 at work, Respondent had two syncopal episodes while he was treating patients. The precise cause
7 of these episodes was not determined. Respondent’s supervisor at work knew about his drug
8 abuse history and caused Respondent to undergo random urine testing. On or about March 11,
9 2016, Respondent had a positive urine screen. In his explanation for the positive test, Respondent
10 claimed that an anonymous sex partner had put drugs into his Gatorade and that is why he had a
11 positive urine screen.

12 10. Respondent has a history of failing to complete residential treatment programs. In an
13 interview with the Board on or about April 11, 2016, Respondent stated that the Program first
14 referred him to a treatment center, but he got into a fight with another resident and left after five
15 days. He was able to complete 30 days at Michael’s House, followed by intensive outpatient
16 therapy for four months. However, one month after he left the outpatient program, Respondent
17 relapsed. He was referred to the Impact Recovery Center in Pasadena, a “highly intrusive boot
18 camp style program with rigid rules and an extreme degree of confrontation” with its residents.
19 Respondent lasted 37 days before he was terminated from the program. Although Respondent
20 was able to complete a three-month program at Creative Care Malibu, he did have one instance of
21 using methamphetamine which he did “after being enticed for a week” to have sex and use drugs
22 with another person. After his positive drug screen in March 2016, Respondent was expelled
23 from his sober living facility.

24 11. On or about June 14, 2016, an interim suspension order (ISO) was issued restricting
25 Respondent from practicing medicine during the pendency of that action (800-2015-017850)
26 unless certain conditions were satisfied, including that Respondent abstain from the use of
27 controlled substances and alcohol and undergo biological fluid testing, among other terms.
28 Despite the ISO requirement that Respondent abstain from controlled substances and undergo

1 biological fluid testing, on or about August 1, 2016, Respondent violated the terms of the ISO
2 when he tested positive for methamphetamines. He admitted to using the drug, attributing the
3 drug use to difficulties in his personal life.

4 12. Thereafter, the Decision placed him on probation, effective June 16, 2017.

5 FIRST CAUSE TO REVOKE PROBATION

6 (Controlled Substances - Abstain From Use and Biological Fluid Testing)

7 13. At all times after the effective date of Respondent's probation, Condition 4 stated, in
8 pertinent part: "CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall
9 abstain completely from the personal use or possession of controlled substances as defined in the
10 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and
11 Professions Code section 4022, and any drugs requiring a prescription."

12 14. At all times after the effective date of Respondent's probation, Condition 12 stated, in
13 pertinent part: "BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
14 biological fluid testing, at respondent's expense, upon request of the Board or its designee.
15 'Biological fluid testing' may include, but is not limited to, urine, blood, breathalyzer, hair follicle
16 testing, or similar drug screening approved by the Board or its designee. Respondent shall make
17 daily contact with the Board or its designee to determine whether biological fluid testing is
18 required. Respondent shall be tested on the date of the notification as directed by the Board or its
19 designee. The Board may order a respondent to undergo a biological fluid test on any day, at any
20 time, including weekends and holidays. Except when testing on a specific date as ordered by the
21 Board or its designee, the scheduling of biological fluid testing shall be done on a random basis.
22 The cost of biological fluid testing shall be borne by the respondent."

23 15. Respondent's probation is subject to revocation because he failed to comply with
24 Probation Conditions 4 and 12, referenced above. The facts and circumstances regarding this
25 violation are as follows:

26 16. The allegations set forth in paragraphs 7 through 12, inclusive, above are incorporated
27 herein by reference as if fully set forth.

28 17. On or about each of the following dates, Respondent submitted a biological fluid

1 sample, each of which resulted in an inconclusive test result due to the oxidant content in each
2 sample: February 15, 2018, February 17, 2018, February 18, 2018, February 23, 2018, and
3 February 28, 2018. A Board employee spoke to Respondent via telephone regarding the invalid
4 samples submitted to the testing service, and Respondent did not have an explanation for the
5 invalid results. Thereafter, the Board requested that the testing service add two special tests, one
6 hair test and one blood test, to Respondent's calendar. The presence of oxidants in repeat male
7 urine samples is unusual. Oxidants can interfere with testing results with respect to opiates and
8 tetrahydrocannabinol (THC), which is the principal psychoactive constituent of cannabis.

9 18. On or about April 10, 2018, pursuant to the provisions of his probation, Respondent
10 was selected to provide a random hair sample pursuant to Condition 12 of his probation.
11 Respondent provided a hair sample which was forwarded to the United States Drug Testing
12 Laboratories. Respondent's hair sample was tested, and the result was positive for amphetamines
13 and methamphetamines, beyond the cut-off value. Respondent admitted to the drug use, but
14 alleged that it was involuntary. He explained that he allowed a homeless person to live with him
15 and that homeless person was using methamphetamine and contaminating his common areas
16 including the kitchen and living room thereby causing Respondent's positive test. Respondent's
17 explanation is not scientifically valid and does not explain his positive test.

18 19. On or about June 29, 2018, Respondent was randomly selected to provide a biological
19 fluid sample. Respondent provided the sample shortly after midnight on or about June 30, 2018,
20 and the laboratory test results based upon that sample were positive for the metabolites of
21 amphetamine and methamphetamine. In response to a letter requesting an explanation,
22 Respondent wrote that he believed his home was contaminated by a "friend" who was in early
23 recovery from methamphetamine use that he allowed to live with him.

24 20. After receipt of the positive test results, a Board employee requested the testing
25 laboratory to schedule a hair test for Respondent. On or about July 13, 2018, Respondent was
26 selected to provide a hair sample. According to a letter from the executive director at the
27 collection site, Respondent presented to the collection on or about July 13, 2018. However, due
28 to some type of clay or mud on Respondent's head, the collection site was not able to collect a

1 sufficient hair sample for testing. When asked about the substance on his head, Respondent
2 stated that he had a "scalp condition."

3 21. On or about August 10, 2018, Respondent was randomly selected to provide a
4 biological fluid sample. The laboratory test results based upon that sample were positive for the
5 metabolites of amphetamine and methamphetamine. In response to a request for an explanation,
6 Respondent stated in a letter to the Board, dated August 22, 2018, that he has not knowingly or
7 willingly ingested any prohibited substance. Respondent continued to suspect the former drug
8 addict who had lived with him shortly of tampering with his belongings. Respondent stated he
9 met with the individual and that individual admitted to putting methamphetamine "everywhere"
10 in Respondent's home. Respondent stated he has taken a number of measures such as disposing
11 of all food in his home and eating out as much as possible.

12 22. On or about each the following additional dates, Respondent provided a biological
13 fluid samples which each tested positive for amphetamine use: August 20, 2018, September 1,
14 2018, and September 3, 2018. In a letter to the Board, dated September 12, 2018, Respondent
15 again stated he believes the cause of his positive tests is the individual contaminating his home.
16 In addition, Respondent stated in the letter that he recently tested his psychiatric medication and
17 has since stopped using them and discarded them, as they were contaminated as well. Further,
18 Respondent reported in the letter that he moved out of his previous home.

19 23. In an email to a Board analyst, dated September 6, 2018, Respondent stated, he failed
20 to submit a biological fluid sample when selected on September 2, 2018, due to financial reasons,
21 and instead went to submit one the next day when he could obtain the funds.

22 24. On or about September 27, 2018, Respondent was selected to provide a hair sample.
23 The laboratory report of that collection indicated a positive result for amphetamine and
24 methamphetamine. A hair test can cover substance consumption for up to a 90-day period.

25 25. On or about each of October 2, 2018 and October 9, 2018, Respondent was selected
26 to provide a biological fluid sample. The laboratory reports from both samples indicated a
27 positive result for amphetamine and methamphetamine. In a letter to the Board, dated October
28 17, 2018, Respondent again explained that he believed the same individual identified in his past

1 letters was responsible and suspected that although Respondent had not been in contact with him,
2 that individual knew of Respondent's location due to a tracking feature on Respondent's phone
3 and that he had a spare key to Respondent's car. Respondent further reported that he updated his
4 phone to remove the tracking feature and that he would change his car with a family member.
5 After receiving Respondent's letter above, the Board received another positive result for
6 amphetamine and methamphetamine from a biological fluid sample submitted on October 11,
7 2018.

8 26. On or about October 21, 2018, Respondent was selected to provide a biological fluid
9 sample for testing. The test results were positive for amphetamine and methamphetamine.

10 27. On or about November 12, 2018, Respondent was selected to provide another
11 biological fluid sample. The test results were positive for amphetamine and methamphetamine.

12 28. On or about November 23, 2018, Respondent's testing service account was suspended
13 due to an unpaid, overdue balance.

14 29. On or about November 26, 2018, Respondent emailed a Board analyst and explained
15 that his account was suspended and that he hoped to pay his balance in a day or two. The Board
16 analyst explained to Respondent that while his account was suspended, he would not receive his
17 testing notification for the day and it would be considered a missed test if he did not submit a
18 sample.

19 30. Since his account became suspended on or about November 23, 2018, Respondent
20 has not checked in to the testing service, has not submitted biological fluid samples, and his
21 account remains suspended. Since then, the Board has made multiple unsuccessful attempts to
22 contact Respondent via telephone and has left voicemail messages to him, but Respondent has not
23 returned any of the calls as requested in the voicemail messages.

24 31. Respondent has tested positive for amphetamine and methamphetamine at least
25 twelve (12) times during the 2018 calendar year.

26 SECOND CAUSE TO REVOKE PROBATION

27 (Compliance with Probation)

28 32. At all times after the effective date of Respondent's probation, Condition 20 stated, in

1 pertinent part: "GENERAL PROBATION REQUIREMENTS. Compliance with Probation Unit.

2 Respondent shall comply with the Board's probation unit."

3 33. Respondent's probation is subject to revocation because he failed to comply with
4 Probation Condition 20, referenced above. The facts and circumstances regarding this violation
5 are as follows:

6 34. The allegations of the First Cause to Revoke Probation are incorporated here by
7 reference as if fully set forth.

8 35. In addition, on or about April 12, 2018, Respondent admitted to his psychotherapist
9 that during a physician's retreat he publicly stated that there were several ways in which he was
10 able to beat urine tests in the past.

11 DISCIPLINE CONSIDERATIONS

12 36. To determine the degree of discipline, if any, to be imposed on Respondent,
13 Complainant alleges that that on or about June 16, 2017, in a prior disciplinary action entitled In
14 the Matter of the Accusation Against Vahe Michael Azarian, M.D. before the Medical Board of
15 California, in Case No. 800-2015-017850, Respondent's license was revoked, the revocation was
16 stayed and Respondent was placed on probation for seven years for admitted allegations,
17 including that he (1) was unable to practice medicine safely due to mental and/or physical illness
18 affecting competency, (2) used and administered to himself controlled substances in such a
19 manner as to be dangerous to others and/or to an extent that such use impaired his ability to
20 practice medicine, and (3) administered/possessed controlled substances. That decision is now
21 final and is incorporated by reference as if fully set forth.


22 ///

1 PRAYER

2 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
3 and that following the hearing, the Medical Board of California issue a decision:

- 4 1. Revoking the probation that was granted by the Medical Board of California in Case
5 No. 800-2015-017850 and imposing the disciplinary order that was stayed thereby revoking
6 Physician's and Surgeon's Certificate No. A 125140 issued to Vahe Michael Azarian, M.D.;
- 7 2. Revoking or suspending Physician's and Surgeon's Certificate No. A 125140, issued
8 to Vahe Michael Azarian, M.D.;
- 9 3. Revoking, suspending or denying approval of Vahe Michael Azarian, M.D.'s
10 authority to supervise any physician assistants or advanced practice nurses;
- 11 4. Ordering Vahe Michael Azarian, M.D. to pay the Medical Board of California, if
12 placed on probation, the costs of probation monitoring; and
- 13 5. Taking such other and further action as deemed necessary and proper.

14
15 DATED: April 10, 2019


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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Exhibit A

Decision and Order

Medical Board of California Case No. 800-2015-017850

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:)

VAHE MICHAEL AZARIAN, M.D.)

Case No. 800-2015-017850

**Physician's and Surgeon's
Certificate No. A 125140)**

Respondent)

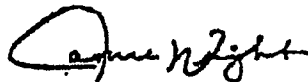
DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on June 16, 2017.

IT IS SO ORDERED: May 18, 2017.

MEDICAL BOARD OF CALIFORNIA



**Jamie Wright, J.D., Chair
Panel A**

1 XAVIER BECERRA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 EDWARD KIM
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7 *Attorneys for Complainant*

8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2015-017850

13 **VAHE MICHAEL AZARIAN, M.D.**
1231 N. Cedar Street
Glendale, CA 91214

OAH No. 2016090358

14 **Physician's and Surgeon's**
15 **Certificate No. 125140.**

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

16 Respondent.

17 **IT IS HEREBY STIPULATED AND AGREED** by and between the parties to the above-
18 entitled proceedings that the following matters are true:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
21 of California (Board). She brought this action solely in her official capacity and is represented in
22 this matter by Xavier Becerra, Attorney General of the State of California, by Edward Kim,
23 Deputy Attorney General.

24 2. Respondent VAHE MICHAEL AZARIAN, M.D. (Respondent) is represented in this
25 proceeding by attorney Peter R. Osinoff, Esq., whose address is: 355 South Grand Avenue, Suite
26 1750, Los Angeles, California 90071-1562.

27 3. On or about April 4, 2013, the Board issued Physician's and Surgeon's Certificate No.
28 125140 to VAHE MICHAEL AZARIAN, M.D. (Respondent). The Physician's and Surgeon's

1 Certificate was in full force and effect at all times relevant to the charges brought in Accusation
2 No. 800-2015-017850, and will expire on February 28, 2019, unless renewed.

3 JURISDICTION

4 4. Accusation No. 800-2015-017850 was filed before the Board, and is currently
5 pending against Respondent. The Accusation and all other statutorily required documents were
6 properly served on Respondent on June 30, 2016. Respondent timely filed his Notice of Defense
7 contesting the Accusation.

8 5. A copy of Accusation No. 800-2015-017850 is attached as exhibit A and incorporated
9 herein by reference.

10 ADVISEMENT AND WAIVERS

11 6. Respondent has carefully read, fully discussed with counsel, and understands the
12 charges and allegations in Accusation No. 800-2015-017850. Respondent has also carefully read,
13 fully discussed with counsel, and understands the effects of this Stipulated Settlement and
14 Disciplinary Order.

15 7. Respondent is fully aware of his legal rights in this matter, including the right to a
16 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine
17 the witnesses against him; the right to present evidence and to testify on his own behalf; the right
18 to the issuance of subpoenas to compel the attendance of witnesses and the production of
19 documents; the right to reconsideration and court review of an adverse decision; and all other
20 rights accorded by the California Administrative Procedure Act and other applicable laws.

21 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
22 every right set forth above.

23 CULPABILITY

24 9. Respondent admits the truth of each and every charge and allegation in Accusation
25 No. 800-2015-017850.

26 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
27 discipline and he agrees to be bound by the Board's probationary terms as set forth in the
28 Disciplinary Order below.

1 CONTINGENCY

2 11. This stipulation shall be subject to approval by the Medical Board of California.
3 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
4 Board of California may communicate directly with the Board regarding this stipulation and
5 settlement, without notice to or participation by Respondent or his counsel. By signing the
6 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
7 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
8 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
9 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
10 action between the parties, and the Board shall not be disqualified from further action by having
11 considered this matter.

12 12. The parties understand and agree that Portable Document Format (PDF) and facsimile
13 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
14 signatures thereto, shall have the same force and effect as the originals.

15 13. In consideration of the foregoing admissions and stipulations, the parties agree that
16 the Board may, without further notice or formal proceeding, issue and enter the following
17 Disciplinary Order:

18 DISCIPLINARY ORDER

19 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. 125140 issued to
20 Respondent VAHE MICHAEL AZARIAN, M.D. is revoked. However, the revocation is stayed
21 and Respondent is placed on probation for seven (7) years on the following terms and conditions.

22 1. ACTUAL SUSPENSION. As part of probation, Respondent is suspended from the
23 practice of medicine for thirty (30) days after the effective date of this decision.

24 2. CONTROLLED SUBSTANCES - PARTIAL RESTRICTION. Respondent shall not
25 order, prescribe, dispense, administer, furnish, or possess any controlled substances as defined by
26 the California Uniform Controlled Substances Act ("Act"), except for those drugs listed in
27 Schedules three (III), four (IV), and five (V) of the Act, provided that, in the event that
28 Respondent has complied with all the terms and conditions of set forth in this order, then on the

1 date that is one year after the effective date of this order, the above restriction on drugs listed on
2 Schedule two (II) of the Act shall cease to be in effect. Respondent shall not issue an oral or
3 written recommendation or approval to a patient or a patient's primary caregiver for the
4 possession or cultivation of marijuana for the personal medical purposes of the patient within the
5 meaning of Health and Safety Code section 11362.5. If Respondent forms the medical opinion,
6 after an appropriate prior examination and medical indication, that a patient's medical condition
7 may benefit from the use of marijuana, Respondent shall so inform the patient and shall refer the
8 patient to another physician who, following an appropriate prior examination and medical
9 indication, may independently issue a medically appropriate recommendation or approval for the
10 possession or cultivation of marijuana for the personal medical purposes of the patient within the
11 meaning of Health and Safety Code section 11362.5. In addition, Respondent shall inform the
12 patient or the patient's primary caregiver that Respondent is prohibited from issuing a
13 recommendation or approval for the possession or cultivation of marijuana for the personal
14 medical purposes of the patient and that the patient or the patient's primary caregiver may not
15 rely on Respondent's statements to legally possess or cultivate marijuana for the personal medical
16 purposes of the patient. Respondent shall fully document in the patient's chart that the patient or
17 the patient's primary caregiver was so informed. Nothing in this condition prohibits Respondent
18 from providing the patient or the patient's primary caregiver information about the possible
19 medical benefits resulting from the use of marijuana.

20 Respondent shall immediately surrender Respondent's current DEA permit to the Drug
21 Enforcement Administration for cancellation and reapply for a new DEA permit limited to those
22 Schedules authorized by this order. Within 15 calendar days after the effective date of this
23 Decision, Respondent shall submit proof that Respondent has surrendered Respondent's DEA
24 permit to the Drug Enforcement Administration for cancellation and re-issuance. Within 15
25 calendar days after the effective date of issuance of a new DEA permit, Respondent shall submit a
26 true copy of the permit to the Board or its designee.

27 3. CONTROLLED SUBSTANCES- MAINTAIN RECORDS AND ACCESS TO
28 RECORDS AND INVENTORIES. Respondent shall maintain a record of all controlled

1 substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any
2 recommendation or approval which enables a patient or patient's primary caregiver to possess or
3 cultivate marijuana for the personal medical purposes of the patient within the meaning of Health
4 and Safety Code section 11362.5, during probation, showing all the following: 1) the name and
5 address of patient; 2) the date; 3) the character and quantity of controlled substances involved;
6 and 4) the indications and diagnosis for which the controlled substances were furnished.

7 Respondent shall keep these records in a separate file or ledger, in chronological order. All
8 records and any inventories of controlled substances shall be available for immediate inspection
9 and copying on the premises by the Board or its designee at all times during business hours and
10 shall be retained for the entire term of probation.

11 4. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain
12 completely from the personal use or possession of controlled substances as defined in the
13 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and
14 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not
15 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide
16 illness or condition.

17 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent
18 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone
19 number; medication name, strength, and quantity; and issuing pharmacy name, address, and
20 telephone number.

21 5. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the
22 use of products or beverages containing alcohol.

23 6. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
24 the effective date of this Decision, Respondent shall enroll in a professionalism program, that
25 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.
26 Respondent shall participate in and successfully complete that program. Respondent shall
27 provide any information and documents that the program may deem pertinent. Respondent shall
28 successfully complete the classroom component of the program not later than six (6) months after

1 Respondent's initial enrollment, and the longitudinal component of the program not later than the
2 time specified by the program, but no later than one (1) year after attending the classroom
3 component. The professionalism program shall be at Respondent's expense and shall be in
4 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

5 A professionalism program taken after the acts that gave rise to the charges in the
6 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
7 or its designee, be accepted towards the fulfillment of this condition if the program would have
8 been approved by the Board or its designee had the program been taken after the effective date of
9 this Decision.

10 Respondent shall submit a certification of successful completion to the Board or its
11 designee not later than 15 calendar days after successfully completing the program or not later
12 than 15 calendar days after the effective date of the Decision, whichever is later.

13 7. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision,
14 Respondent shall submit to the Board or its designee for prior approval the name and
15 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who
16 has a doctoral degree in psychology and at least five years of postgraduate experience in the
17 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall
18 undergo and continue psychotherapy treatment, including any modifications to the frequency of
19 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

20 The psychotherapist shall consider any information provided by the Board or its designee
21 and any other information the psychotherapist deems relevant and shall furnish a written
22 evaluation report to the Board or its designee. Respondent shall cooperate in providing the
23 psychotherapist any information and documents that the psychotherapist may deem pertinent.

24 Respondent shall have the treating psychotherapist submit quarterly status reports to the
25 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric
26 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of
27 probation, Respondent is found to be mentally unfit to resume the practice of medicine without
28 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the

1 period of probation shall be extended until the Board determines that Respondent is mentally fit
2 to resume the practice of medicine without restrictions.

3 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

4 8. MEDICAL EVALUATION AND TREATMENT. Within 30 calendar days of the
5 effective date of this Decision, and on a periodic basis thereafter as may be required by the Board
6 or its designee, Respondent shall undergo a medical evaluation by a Board-appointed physician
7 who shall consider any information provided by the Board or designee and any other information
8 the evaluating physician deems relevant and shall furnish a medical report to the Board or its
9 designee. Respondent shall provide the evaluating physician any information and documentation
10 that the evaluating physician may deem pertinent.

11 Following the evaluation, Respondent shall comply with all restrictions or conditions
12 recommended by the evaluating physician within 15 calendar days after being notified by the
13 Board or its designee. If Respondent is required by the Board or its designee to undergo medical
14 treatment, Respondent shall within 30 calendar days of the requirement notice, submit to the
15 Board or its designee for prior approval the name and qualifications of a California licensed
16 treating physician of Respondent's choice. Upon approval of the treating physician, Respondent
17 shall within 15 calendar days undertake medical treatment and shall continue such treatment until
18 further notice from the Board or its designee.

19 The treating physician shall consider any information provided by the Board or its designee
20 or any other information the treating physician may deem pertinent prior to commencement of
21 treatment. Respondent shall have the treating physician submit quarterly reports to the Board or
22 its designee indicating whether or not the Respondent is capable of practicing medicine safely.
23 Respondent shall provide the Board or its designee with any and all medical records pertaining to
24 treatment, the Board or its designee deems necessary.

25 If, prior to the completion of probation, Respondent is found to be physically incapable of
26 resuming the practice of medicine without restrictions, the Board shall retain continuing
27 jurisdiction over Respondent's license and the period of probation shall be extended until the
28 Board determines that Respondent is physically capable of resuming the practice of medicine

1 without restrictions. Respondent shall pay the cost of the medical evaluation(s) and treatment.

2 Respondent shall not engage in the practice of medicine until notified in writing by the
3 Board or its designee of its determination that Respondent is medically fit to practice safely.

4 9. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the
5 solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice
6 where: 1) Respondent merely shares office space with another physician but is not affiliated for
7 purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that
8 location.

9 If Respondent fails to establish a practice with another physician or secure employment in
10 an appropriate practice setting within 60 calendar days of the effective date of this Decision,
11 Respondent shall receive a notification from the Board or its designee to cease the practice of
12 medicine within three (3) calendar days after being so notified. The Respondent shall not resume
13 practice until an appropriate practice setting is established.

14 If, during the course of the probation, the Respondent's practice setting changes and the
15 Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent
16 shall notify the Board or its designee within 5 calendar days of the practice setting change. If
17 Respondent fails to establish a practice with another physician or secure employment in an
18 appropriate practice setting within 60 calendar days of the practice setting change, Respondent
19 shall receive a notification from the Board or its designee to cease the practice of medicine within
20 three (3) calendar days after being so notified. The Respondent shall not resume practice until an
21 appropriate practice setting is established.

22 10. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS: Within thirty (30)
23 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as
24 may be required by the Board or its designee, respondent shall undergo and complete a clinical
25 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed
26 board certified physician and surgeon. The examiner shall consider any information provided by
27 the Board or its designee and any other information he or she deems relevant, and shall furnish a
28 written evaluation report to the Board or its designee:

1 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
2 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
3 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
4 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
5 professional standards for conducting substance abuse clinical diagnostic evaluations. The
6 evaluator shall not have a current or former financial, personal, or business relationship with
7 respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
8 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
9 evaluator's opinion, whether respondent has a substance abuse problem, whether respondent is a
10 threat to himself or herself or others, and recommendations for substance abuse treatment,
11 practice restrictions, or other recommendations related to respondent's rehabilitation and ability
12 to practice safely. If the evaluator determines during the evaluation process that respondent is a
13 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)
14 hours of such a determination.

15 In formulating his or her opinion as to whether respondent is safe to return to either part-
16 time or full-time practice and what restrictions or recommendations should be imposed, including
17 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
18 following factors: respondent's license type; respondent's history; respondent's documented
19 length of sobriety (i.e., length of time that has elapsed since respondent's last substance use);
20 respondent's scope and pattern of substance abuse; respondent's treatment history, medical
21 history and current medical condition; the nature, duration and severity of respondent's substance
22 abuse problem or problems; and whether respondent is a threat to himself or herself or the public.

23 For all clinical diagnostic evaluations, a final written report shall be provided to the Board
24 no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator
25 requests additional information or time to complete the evaluation and report, an extension may
26 be granted, but shall not exceed thirty (30) days from the date the evaluator was originally
27 assigned the matter.

28 The Board shall review the clinical diagnostic evaluation report within five (5) business

1 days of receipt to determine whether respondent is safe to return to either part-time or full-time
2 practice and what restrictions or recommendations shall be imposed on respondent based on the
3 recommendations made by the evaluator. Respondent shall not be returned to practice until he or
4 she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating
5 that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited
6 substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of
7 Regulations.

8 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall
9 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic
10 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
11 designee, shall be borne by the licensee.

12 Respondent shall not engage in the practice of medicine until notified by the Board or its
13 designee that he or she is fit to practice medicine safely. The period of time that respondent is not
14 practicing medicine shall not be counted toward completion of the term of probation. Respondent
15 shall undergo biological fluid testing as required in this Decision at least two (2) times per week
16 while awaiting the notification from the Board if he or she is fit to practice medicine safely.

17 Respondent shall comply with all restrictions or conditions recommended by the examiner
18 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
19 by the Board or its designee.

20 11. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)
21 days of the effective date of this Decision, respondent shall provide to the Board the names,
22 physical addresses, mailing addresses, and telephone numbers of any and all employers and
23 supervisors. Respondent shall also provide specific, written consent for the Board, respondent's
24 worksite monitor, and respondent's employers and supervisors to communicate regarding
25 respondent's work status, performance, and monitoring.

26 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
27 Well Being Committee Chair, or equivalent, if applicable, when the respondent has medical staff
28 privileges.

1 12. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
2 biological fluid testing, at respondent's expense, upon request of the Board or its designee.
3 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
4 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
5 make daily contact with the Board or its designee to determine whether biological fluid testing is
6 required. Respondent shall be tested on the date of the notification as directed by the Board or its
7 designee. The Board may order a respondent to undergo a biological fluid test on any day, at any
8 time, including weekends and holidays. Except when testing on a specific date as ordered by the
9 Board or its designee, the scheduling of biological fluid testing shall be done on a random basis.
10 The cost of biological fluid testing shall be borne by the respondent.

11 During the first year of probation, respondent shall be subject to 52 to 104 random tests.
12 During the second year of probation and for the duration of the probationary term, up to five (5)
13 years, respondent shall be subject to 36 to 104 random tests per year. Only if there has been no
14 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
15 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
16 of random tests to the first-year level of frequency for any reason.

17 Prior to practicing medicine, respondent shall contract with a laboratory or service,
18 approved in advance by the Board or its designee, that will conduct random, unannounced,
19 observed, biological fluid testing and meets all the following standards:

20 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
21 Association or have completed the training required to serve as a collector for the United
22 States Department of Transportation.

23 (b) Its specimen collectors conform to the current United States Department of
24 Transportation Specimen Collection Guidelines

25 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
26 by the United States Department of Transportation without regard to the type of test
27 administered.

28 (d) Its specimen collectors observe the collection of testing specimens.

1 (e) Its laboratories are certified and accredited by the United States Department of Health
2 and Human Services.

3 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
4 of receipt and all specimens collected shall be handled pursuant to chain of custody
5 procedures. The laboratory shall process and analyze the specimens and provide legally
6 defensible test results to the Board within seven (7) business days of receipt of the
7 specimen. The Board will be notified of non-negative results within one (1) business day
8 and will be notified of negative test results within seven (7) business days.

9 (g) Its testing locations possess all the materials, equipment, and technical expertise
10 necessary in order to test respondent on any day of the week.

11 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
12 for the detection of alcohol and illegal and controlled substances.

13 (i) It maintains testing sites located throughout California.

14 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
15 computer database that allows the respondent to check in daily for testing.

16 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
17 access to drug test results and compliance reporting information that is available 24 hours a
18 day.

19 (l) It employs or contracts with toxicologists that are licensed physicians and have
20 knowledge of substance abuse disorders and the appropriate medical training to interpret
21 and evaluate laboratory biological fluid test results, medical histories, and any other
22 information relevant to biomedical information.

23 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
24 while practicing, even if the respondent holds a valid prescription for the substance.

25 Prior to changing testing locations for any reason, including during vacation or other travel,
26 alternative testing locations must be approved by the Board and meet the requirements above.

27 The contract shall require that the laboratory directly notify the Board or its designee of
28 non-negative results within one (1) business day and negative test results within seven (7)

1 business days of the results becoming available. Respondent shall maintain this laboratory or
2 service contract during the period of probation.

3 A certified copy of any laboratory test result may be received in evidence in any
4 proceedings between the Board and respondent.

5 If a biological fluid test result indicates respondent has used, consumed, ingested, or
6 administered to himself or herself a prohibited substance, the Board shall order respondent to
7 cease practice and instruct respondent to leave any place of work where respondent is practicing
8 medicine or providing medical services. The Board shall immediately notify all of respondent's
9 employers, supervisors and work monitors, if any, that respondent may not practice medicine or
10 provide medical services while the cease-practice order is in effect.

11 A biological fluid test will not be considered negative if a positive result is obtained while
12 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
13 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

14 After the issuance of a cease-practice order, the Board shall determine whether the positive
15 biological fluid test is in fact evidence of prohibited substance use by consulting with the
16 specimen collector and the laboratory, communicating with the licensee, his or her treating
17 physician(s), other health care provider, or group facilitator, as applicable.

18 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the
19 acquisition and chemical analysis of a respondent's urine, blood, breath, or hair.

20 For purposes of this condition, the term "prohibited substance" means an illegal drug, a
21 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
22 respondent and approved by the Board, alcohol, or any other substance the respondent has been
23 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

24 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
25 substance, respondent has committed a major violation, as defined in section 1361.52(a), and the
26 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
27 any other terms or conditions the Board determines are necessary for public protection or to
28 enhance respondent's rehabilitation.

1 13. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
2 the effective date of this Decision, respondent shall submit to the Board or its designee, for its
3 prior approval, the name of a substance abuse support group which he or she shall attend for the
4 duration of probation. Respondent shall attend substance abuse support group meetings at least
5 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
6 abuse support group meeting costs.

7 The facilitator of the substance abuse support group meeting shall have a minimum of three
8 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
9 or certified by the state or nationally certified organizations. The facilitator shall not have a
10 current or former financial, personal, or business relationship with respondent within the last five
11 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
12 the same facilitator does not constitute a prohibited current or former financial, personal, or
13 business relationship.

14 The facilitator shall provide a signed document to the Board or its designee showing
15 respondent's name, the group name, the date and location of the meeting, respondent's
16 attendance, and respondent's level of participation and progress. The facilitator shall report any
17 unexcused absence by respondent from any substance abuse support group meeting to the Board,
18 or its designee, within twenty-four (24) hours of the unexcused absence.

19 14. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty
20 (30) calendar days of the effective date of this Decision, respondent shall submit to the Board or
21 its designee for prior approval as a worksite monitor, the name and qualifications of one or more
22 licensed physician and surgeon, other licensed health care professional if no physician and
23 surgeon is available, or, as approved by the Board or its designee, a person in a position of
24 authority who is capable of monitoring the respondent at work.

25 The worksite monitor shall not have a current or former financial, personal, or familial
26 relationship with respondent, or any other relationship that could reasonably be expected to
27 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its
28 designee. . If it is impractical for anyone but respondent's employer to serve as the worksite

1 monitor, this requirement may be waived by the Board or its designee, however, under no
2 circumstances shall respondent's worksite monitor be an employee or supervisee of the licensee.

3 The worksite monitor shall have an active unrestricted license with no disciplinary action
4 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms
5 and conditions of respondent's disciplinary order and agrees to monitor respondent as set forth by
6 the Board or its designee.

7 Respondent shall pay all worksite monitoring costs.

8 The worksite monitor shall have face-to-face contact with respondent in the work
9 environment on as frequent a basis as determined by the Board or its designee, but not less than
10 once per week; interview other staff in the office regarding respondent's behavior, if requested by
11 the Board or its designee; and review respondent's work attendance.

12 The worksite monitor shall verbally report any suspected substance abuse to the Board and
13 respondent's employer or supervisor within one (1) business day of occurrence. If the suspected
14 substance abuse does not occur during the Board's normal business hours, the verbal report shall
15 be made to the Board or its designee within one (1) hour of the next business day. A written
16 report that includes the date, time, and location of the suspected abuse; respondent's actions; and
17 any other information deemed important by the worksite monitor shall be submitted to the Board
18 or its designee within 48 hours of the occurrence.

19 The worksite monitor shall complete and submit a written report monthly or as directed by
20 the Board or its designee which shall include the following: (1) respondent's name and
21 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)
22 the worksite monitor's license number, if applicable; (4) the location or location(s) of the
23 worksite; (5) the dates respondent had face-to-face contact with the worksite monitor; (6) the
24 names of worksite staff interviewed, if applicable; (7) a report of respondent's work attendance;
25 (8) any change in respondent's behavior and/or personal habits; and (9) any indicators that can
26 lead to suspected substance abuse by respondent. Respondent shall complete any required
27 consent forms and execute agreements with the approved worksite monitor and the Board, or its
28 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

1 If the worksite monitor resigns or is no longer available, respondent shall, within five (5)
2 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
3 approval, the name and qualifications of a replacement monitor who will be assuming that
4 responsibility within fifteen (15) calendar days. If respondent fails to obtain approval of a
5 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
6 monitor, respondent shall receive a notification from the Board or its designee to cease the
7 practice of medicine within three (3) calendar days after being so notified. Respondent shall
8 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
9 responsibility.

10 15. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING

11 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of
12 probation.

13 A. If respondent commits a major violation of probation as defined by section 1361.52,
14 subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or
15 more of the following actions:

16 (1) Issue an immediate cease-practice order and order respondent to undergo a clinical
17 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
18 Title 16 of the California Code of Regulations, at respondent's expense. The cease-practice order
19 issued by the Board or its designee shall state that respondent must test negative for at least a
20 month of continuous biological fluid testing before being allowed to resume practice. For
21 purposes of the determining the length of time a respondent must test negative while undergoing
22 continuous biological fluid testing following issuance of a cease-practice order, a month is
23 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
24 notified in writing by the Board or its designee that he or she may do so.

25 (2) Increase the frequency of biological fluid testing.

26 (3) Refer respondent for further disciplinary action, such as suspension, revocation, or
27 other action as determined by the Board or its designee.

28 B. If respondent commits a minor violation of probation as defined by section 1361.52,

1 subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or
2 more of the following actions:

- 3 (1) Issue a cease-practice order;
- 4 (2) Order practice limitations;
- 5 (3) Order or increase supervision of respondent;
- 6 (4) Order increased documentation;
- 7 (5) Issue a citation and fine, or a warning letter;
- 8 (6) Order respondent to undergo a clinical diagnostic evaluation to be conducted in
9 accordance with section 1361.5; subdivision (c)(1), of Title 16 of the California Code of
10 Regulations, at respondent's expense;
- 11 (7) Take any other action as determined by the Board or its designee.

12 C. Nothing in this Decision shall be considered a limitation on the Board's authority to
13 revoke respondent's probation if he or she has violated any term or condition of probation. If
14 respondent violates probation in any respect, the Board, after giving respondent notice and the
15 opportunity to be heard, may revoke probation and carry out the disciplinary order that was
16 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
17 against respondent during probation, the Board shall have continuing jurisdiction until the matter
18 is final, and the period of probation shall be extended until the matter is final.

19 16. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
20 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
21 Chief Executive Officer at every hospital where privileges or membership are extended to
22 Respondent, at any other facility where Respondent engages in the practice of medicine,
23 including all physician and locum tenens registries or other similar agencies, and to the Chief
24 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
25 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
26 calendar days.

27 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

28 17. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE

1 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
2 advanced practice nurses.

3 18. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
4 governing the practice of medicine in California and remain in full compliance with any court
5 ordered criminal probation, payments, and other orders.

6 19. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
7 under penalty of perjury on forms provided by the Board, stating whether there has been
8 compliance with all the conditions of probation.

9 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
10 of the preceding quarter.

11 20. GENERAL PROBATION REQUIREMENTS.

12 Compliance with Probation Unit

13 Respondent shall comply with the Board's probation unit.

14 Address Changes

15 Respondent shall, at all times, keep the Board informed of Respondent's business and
16 residence addresses, email address (if available), and telephone number. Changes of such
17 addresses shall be immediately communicated in writing to the Board or its designee. Under no
18 circumstances shall a post office box serve as an address of record, except as allowed by Business
19 and Professions Code section 2021(b).

20 Place of Practice

21 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
22 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
23 facility.

24 License Renewal

25 Respondent shall maintain a current and renewed California physician's and surgeon's
26 license.

27 Travel or Residence Outside California

28 Respondent shall immediately inform the Board or its designee, in writing, of travel to any

1 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
2 (30) calendar days.

3 In the event Respondent should leave the State of California to reside or to practice
4 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
5 departure and return.

6 21. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
7 available in person upon request for interviews either at Respondent's place of business or at the
8 probation unit office, with or without prior notice throughout the term of probation.

9 22. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
10 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
11 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
12 defined as any period of time Respondent is not practicing medicine as defined in Business and
13 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
14 patient care, clinical activity or teaching, or other activity as approved by the Board. If
15 respondent resides in California and is considered to be in non-practice, respondent shall comply
16 with all terms and conditions of probation. All time spent in an intensive training program which
17 has been approved by the Board or its designee shall not be considered non-practice and does not
18 relieve respondent from complying with all the terms and conditions of probation. Practicing
19 medicine in another state of the United States or Federal jurisdiction while on probation with the
20 medical licensing authority of that state or jurisdiction shall not be considered non-practice. A
21 Board-ordered suspension of practice shall not be considered as a period of non-practice.

22 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
23 months, Respondent shall successfully complete the Federation of State Medical Board's Special
24 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
25 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
26 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

27 Respondent's period of non-practice while on probation shall not exceed two (2) years.

28 Periods of non-practice will not apply to the reduction of the probationary term.

1 Periods of non-practice for a respondent residing outside of California, will relieve
2 Respondent of the responsibility to comply with the probationary terms and conditions with the
3 exception of this condition and the following terms and conditions of probation: Obey All Laws;
4 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
5 Controlled Substances; and Biological Fluid Testing.

6 23. COMPLETION OF PROBATION. Respondent shall comply with all financial
7 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
8 completion of probation. Upon successful completion of probation, Respondent's certificate shall
9 be fully restored.

10 24. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
11 of probation is a violation of probation. If Respondent violates probation in any respect, the
12 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
13 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,
14 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
15 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
16 the matter is final.

17 25. LICENSE SURRENDER. Following the effective date of this Decision, if
18 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
19 the terms and conditions of probation, Respondent may request to surrender his or her license.
20 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
21 determining whether or not to grant the request, or to take any other action deemed appropriate
22 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
23 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
24 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
25 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
26 application shall be treated as a petition for reinstatement of a revoked certificate.


27 26. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
28 with probation monitoring each and every year of probation, as designated by the Board, which

1 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
2 California and delivered to the Board or its designee no later than January 31 of each calendar
3 year.

4 ACCEPTANCE

5 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
6 discussed it with my attorney, Peter R. Osinoff, Esq.. I understand the stipulation and the effect it
7 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
8 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
9 Decision and Order of the Medical Board of California.

10 DATED: February 23, 2017


11 VAHE MICHAEL AZARIAN, M.D.
Respondent

12 I have read and fully discussed with Respondent VAHE MICHAEL AZARIAN, M.D. the
13 terms and conditions and other matters contained in the above Stipulated Settlement and
14 Disciplinary Order. I approve its form and content.

15 DATED: 2/23/17


16 PETER R. OSINOFF, ESQ.
Attorney for Respondent

17 ENDORSEMENT

18 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
19 submitted for consideration by the Medical Board of California.

20 Dated:

Respectfully submitted,

21 XAVIER BECERRA
22 Attorney General of California
23 E. A. JONES III
Supervising Deputy Attorney General

24
25 EDWARD KIM
26 Deputy Attorney General
Attorneys for Complainant

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1 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
2 California and delivered to the Board or its designee no later than January 31 of each calendar
3 year.

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8 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
9 Decision and Order of the Medical Board of California.

10 DATED: _____

11 VAHE MICHAEL AZARIAN, M.D.
Respondent

12 I have read and fully discussed with Respondent VAHE MICHAEL AZARIAN, M.D. the
13 terms and conditions and other matters contained in the above Stipulated Settlement and
14 Disciplinary Order. I approve its form and content.

15 DATED: _____

16 PETER R. OSINOFF, ESQ.
Attorney for Respondent

17 ENDORSEMENT

18 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
19 submitted for consideration by the Medical Board of California.

20 Dated: 2/24/17

Respectfully submitted,

21 XAVIER BECERRA
22 Attorney General of California
23 E. A. JONES III
Supervising Deputy Attorney General

24 

25 EDWARD KIM
26 Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2015-017850

Exhibit A

1 KAMALA D. HARRIS
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 EDWARD KIM
Deputy Attorney General
4 State Bar No. 195729
California Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 897-7336
Facsimile: (213) 897-9395
7 Attorneys for Complainant

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO June 30 20 16
BY W. S. [Signature] ANALYST

8 BEFORE THE
9 MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
10 STATE OF CALIFORNIA

11 In the Matter of the Accusation Against:

Case No. 800-2015-017850

12 VAHE MICHAEL AZARIAN, M.D.
1231 N. Cedar Street
13 Glendale, CA 91207-1426

ACCUSATION

14 Physician's and Surgeon's
15 Certificate No. A-125140

16 Respondent.

17 Complainant alleges:

18 PARTIES

19 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
20 capacity as the Executive Director of the Medical Board of California, Department of Consumer
21 Affairs.

22 2. On or about April 4, 2013, the Medical Board of California issued Physician's and
23 Surgeon's Certificate Number A-125140 to Vahe Michael Azarian, M.D. (Respondent). The
24 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
25 charges brought herein and will expire on February 28, 2017, unless renewed.

26 JURISDICTION

27 3. This Accusation is brought before the Medical Board of California (Board),
28 Department of Consumer Affairs, under the authority of the following laws. All section

1 references are to the Business and Professions Code unless otherwise indicated.

2 4. Section 2227 of the Code provides that a licensee who is found guilty under the
3 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
4 one year, placed on probation and required to pay the costs of probation monitoring, or such other
5 action taken in relation to discipline as the Board deems proper.

6 5. Section 2234 of the Code, states:

7 "The board shall take action against any licensee who is charged with unprofessional
8 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not
9 limited to, the following:

10 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
11 violation of, or conspiring to violate any provision of this chapter.

12 "(b) Gross negligence.

13 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
14 omissions. An initial negligent act or omission followed by a separate and distinct departure from
15 the applicable standard of care shall constitute repeated negligent acts.

16 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate
17 for that negligent diagnosis of the patient shall constitute a single negligent act.

18 "(2) When the standard of care requires a change in the diagnosis, act, or omission that
19 constitutes the negligent act described in paragraph (1), including, but not limited to, a
20 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the
21 applicable standard of care, each departure constitutes a separate and distinct breach of the
22 standard of care.

23 "(d) Incompetence.

24 "(e) The commission of any act involving dishonesty or corruption which is substantially
25 related to the qualifications, functions, or duties of a physician and surgeon.

26 "(f) Any action or conduct which would have warranted the denial of a certificate.

27 "(g) The practice of medicine from this state into another state or country without meeting
28 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not

1 apply to this subdivision. This subdivision shall become operative upon the implementation of the
2 proposed registration program described in Section 2052.5.

3 "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and
4 participate in an interview by the board. This subdivision shall only apply to a certificate holder
5 who is the subject of an investigation by the board."

6 6. Section 2239 of the Code states:

7 "(a) The use or prescribing for or administering to himself or herself, of any controlled
8 substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic
9 beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to
10 any other person or to the public, or to the extent that such use impairs the ability of the licensee
11 to practice medicine safely or more than one misdemeanor or any felony involving the use,
12 consumption, or self-administration of any of the substances referred to in this section, or any
13 combination thereof, constitutes unprofessional conduct. The record of the conviction is
14 conclusive evidence of such unprofessional conduct.

15 "(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is
16 deemed to be a conviction within the meaning of this section. The Division of Medical Quality¹
17 may order discipline of the licensee in accordance with Section 2227 or the Division of Licensing
18 may order the denial of the license when the time for appeal has elapsed or the judgment of
19 conviction has been affirmed on appeal or when an order granting probation is made suspending
20 imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4
21 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of
22 not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint,
23 information, or indictment."

24 7. Section 822 of the Code, states:

25 "If a licensing agency determines that its licensee's ability to practice his or her profession
26 safely is impaired because the licensee is mentally ill, or physically ill affecting competency, the

27 ¹ Pursuant to Business and Professions Code section 2002, "Division of Medical Quality"
28 or "Division" shall be deemed to refer to the Medical Board of California.

1 licensing agency may take action by any one of the following methods:

2 "(a) Revoking the licentiate's certificate or license.

3 "(b) Suspending the licentiate's right to practice.

4 "(c) Placing the licentiate on probation.

5 "(d) Taking such other action in relation to the licentiate as the licensing agency in its
6 discretion deems proper.

7 "The licensing agency shall not reinstate a revoked or suspended certificate or license until
8 it has received competent evidence of the absence or control of the condition which caused its
9 action and until it is satisfied that with due regard for the public health and safety the person's
10 right to practice his or her profession may be safely reinstated."

11 8. Section 2238 of the Code states:

12 "A violation of any federal statute or federal regulation or any of the statutes or regulations
13 of this state regulating dangerous drugs or controlled substances constitutes unprofessional
14 conduct."

15 9. Section 11170 of the Health and Safety Code states:

16 "No person shall prescribe, administer, or furnish a controlled substance for himself."

17 10. Section 11370.1 of the Health and Safety Code states:

18 "(a) Notwithstanding Section 11350 or 11377 or any other provision of law, every person
19 who unlawfully possesses any amount of a substance containing cocaine base, a substance
20 containing cocaine, a substance containing heroin, a substance containing methamphetamine, a
21 crystalline substance containing phencyclidine, a liquid substance containing phencyclidine, plant
22 material containing phencyclidine, or a hand-rolled cigarette treated with phencyclidine while
23 armed with a loaded, operable firearm is guilty of a felony punishable by imprisonment in the
24 state prison for two, three, or four years. As used in this subdivision, "armed with" means having
25 available for immediate offensive or defensive use.

26 "(b) Any person who is convicted under this section shall be ineligible for diversion or
27 deferred entry of judgment under Chapter 2.5 (commencing with Section 1000) of Title 6 of Part
28 2 of the Penal Code."

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FACTUAL ALLEGATIONS

11. Respondent suffers from drug addiction and has a history of alcohol and illicit drug use. He began drinking alcoholic beverages when he was 15, increased his drinking during college and thereafter during medical school (when he tried marijuana and also started using cocaine). Over the years, Respondent illicitly obtained and used cocaine, methamphetamine, GHB, and benzodiazepines, among other drugs. During his residency, Respondent tested positive for drug use after his supervisors raised concerns about his behavior and performance during the residency program in Internal Medicine at Olive View -- University of California, Los Angeles. Although he entered a drug rehabilitation program and returned to his residency, eventually his residency at U.C.L.A. was terminated due to his failure to comply with the terms of his monitoring agreement. Respondent suffered at least two syncopal episodes at work. On November 22, 2015, Respondent was taken to the emergency room after passing out at work at an urgent care clinic. Respondent also had a urine toxicology screen that was positive for amphetamines. On February 7, 2016, Respondent collapsed at the downtown Urgent Care Clinic, but refused transportation and medical treatment. In March 2016, Respondent tested positive for methamphetamines, during a time period while he was employed to work at an urgent care clinic.

INTERVIEW

12. On or about April 11, 2016, an investigator with the Department of Consumer Affairs interviewed Respondent. He admitted to being a drug addict with a history of alcohol abuse and illicit drug use. He admitted he illicitly uses cocaine and methamphetamine.

PSYCHIATRIC EVALUATION

13. On or about April 18, 2016, Dr. M.K., a board certified psychiatrist chosen by the Board to evaluate Respondent, met with Respondent. Based upon his evaluation, Dr. M.K. concluded that Respondent is significantly impaired and suffers from drug addiction with a history of alcohol abuse and illicit drug use. He told Dr. M.K. that he sometimes purposefully took too many drugs in order to produce a seizure. In summary, Dr. M.K. concluded that Respondent suffers from a long history of severe polysubstance drug abuse and cannot safely practice medicine.

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1 **THIRD CAUSE FOR DISCIPLINE**

2 **(Violation of Drug Statute)**

3 20. Respondent is subject to disciplinary action under section 2238 of the Code and
4 sections 11170 and 11370.1 of the Health and Safety Code in that Respondent administered a
5 controlled substance to himself and unlawfully possessed a controlled substance. The
6 circumstances are as follows:

7 21. The allegations of the First and Second Causes for Discipline are incorporated herein
8 by reference as if fully set forth.

9 **FOURTH CAUSE FOR DISCIPLINE**

10 **(General Unprofessional Conduct)**

11 22. Respondent is subject to disciplinary action under section 2234 of the Code,
12 generally, in that he committed unprofessional conduct. The circumstances are as follows:

13 23. The allegations of the First, Second and Third Causes for Discipline are incorporated
14 herein by reference as if fully set forth.

15 ///

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

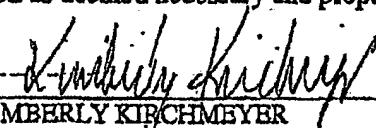
1. Revoking or suspending Physician's and Surgeon's Certificate Number A-125140, issued to Vahe Michael Azarian, M.D.;

2. Revoking, suspending or denying approval of Vahe Michael Azarian, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;

3. Ordering Vahe Michael Azarian, M.D. to pay the Medical Board of California, if placed on probation, the costs of probation monitoring; and

4. Taking such other and further action as deemed necessary and proper.

DATED: June 30, 2016


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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